JORDAN LAKE STATE RECREATION AREA <u>PICNIC SHELTER APPLICATION</u>

Requested by							
		Name of Organization					
Address	Street 1	Route or Box #	City	State	ZIP		
Telephone					ZIF		
		Hereby make	e application for the u	se of			
	SHELTER#	RECI	REATION AREA	4	DATE		
Choice #1							
Choice #2							
Choice #3							
Number of Par	ticipants:						
	r the picnic shelters do not from Memorial Day through FEES \$ 5.00 per vehicle per c \$ 3.00 per vehicle per c \$ 10.00 per bus per day	n Labor Day and on day day – Senior Rate (A	weekends only durin			ance fees are	
Participants n	r building is reserved. Rest nust arrive before 12:00 no full, no one is allowed to e	oon on Saturdays,					
Cancellations	for refunds must be made		in advance for a refu y reschedule ONCE.	•	00 processing fe	e)	
Full payment n	nust accompany each reserv	Joi 280	All checks should be r Reservations rdan Lake SRA State Park Road Dex, NC 27523	nade payable to	Jordan Lake SR.	A and mailed to:	
	hereby agrees to accept a person, obligations and reservations						
	Signature				Title		
	APPROVAL-The	above request does	s not conflict with an	y planned prog	gram or schedule	e .	
	Signature of Approver		Receipt #		D	<u>ate</u>	

.